



Republic of the Philippines
PROVINCE OF ISABELA

P.A. NO: 1885
DATE: _____
BY: Jr

PURCHASE ORDER

Supplier: Gcmed Pharmaceutical Distributor
Address: Legend Mansion Condominium, 212 San Juan St., Brgy. 37, 1300 Pasay City N

P.O. No. : 23-10-MO120B
Date : October 18, 2023

Gentlemen:

Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery : _____ Delivery Term : _____
Date of Delivery : _____ Payment Term: _____

Item No.	Unit	Quantity	Description		Amount
1	boxes	10	Heparin Cap	23.85	238.50
2	pieces	5	Pulse Oximeter Pedia	4,639.00	23,195.00
3	pieces	24	Pulse Oximeter Adult	2,800.00	67,200.00
4	boxes	20	Dental Needle g.27 x 100's	699.85	13,997.00
5	boxes	20	Dental Needle g.30 x 100's	699.85	13,997.00
6	pieces	500	Foley Catheter Fr. 16	69.85	34,925.00
7	trays	50	Lavander Top Edta Microtainer 0.5ml	1,320.00	66,000.00
8	pieces	500	Nebulizer Kit	109.95	54,975.00
9	boxes	100	Hypoallergenic Tape 1x12's	1,238.95	123,895.00
10	pieces	500	Blood Transfusion Set	73.95	36,975.00
11	pieces	500	Solu Set 120ml	221.95	110,975.00



Total Amount Five Hundred Forty Six Thousand Three Hundred Seventy Two Peoss & 50/100 Php **546,372.50**

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed.

Very truly yours,

Conforme:

Gcmed Pharmaceutical Distributor
(Signature over printed Name)
11-6-23
(Date)

RODOLFO T. ALBANO III
Governor

In case of negotiated purchase pursuant to Section 369 (a) of RA 7160, this portion must be accomplished).
Approved per Sanggunian Resolution No.: _____

Certified Correct: _____ Date: _____